## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10766404

				9 1 9 6								
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL	
TOTAL CLAIMS			$ \sqrt{0} $					RATE	FEE	1	RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
ТС	TAL CHARGE	ABLE CLAIMS	40 minus 20= *			0		X\$ 9=		OR	X\$18=	7 <b>/</b> 0
INE	EPENDENT C	LAIMS	√ minus 3 = *					X43=			X86=	
ML	ILTIPLE DEPEN	DENT CLAIM P	RESENT						<u> </u>	OR		86
					"O":	aluma 0	' [	+145=		OR	+290=	
* If the difference in column 1 is less than zero						column 2		TOTAL	<u> </u>	OR	TOTAL	1216
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column						(Column 3)		OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		1	+145=			+290=	
								+145=		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)							DDIT. FEE		OR	ADDIT. FEE	
						_						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FÉE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	•	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	]	X43=		OR	X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								<del>-</del> -	Uh		
								+145= TOTAL		OR	+290=	
										OR ,	TOTAL ADDIT. FEE	·
ADDIT. F (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**	;	=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		2		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b>i</b>  -					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	+290=	
**	** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT, FEE	
	he "Highest Num	ber Previously Paid	For" (Total or	Indep nder	nt) is the	highest number	r foun	d in the app	ropriate box	in col	umn 1.	